

BLAKELY SOKOLOFF TAYLOR & ZAFMAN LLP

TELEPHONE: (714) 557-3800

INTELLECTUAL PROPERTY LAW
12400 WILSHIRE BOULEVARD, 7TH FLOOR
LOS ANGELES, CA 90025

FACSIMILE: (714) 557-3347

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JUL 14 2005

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Deliver to: Eleni A. Shiferaw, USPTO Art Group: 2136
 Facsimile No.: 703-872-9306 Date: July 14, 2005
 From: William W. Schaal, Reg. No. 39,018
 Our Docket No.: 42390P11770 Number of pages 15 including this sheet.
 Application No.: 09/896,088 Filing Date: 6/28/2001
 Docket Due Date(s): _____

Enclosed are the following documents:

<input checked="" type="checkbox"/> Amendment: <u>After Final</u> (<u>11</u> pgs)	<input type="checkbox"/> Issue Fee Transmittal
<input type="checkbox"/> Appeal Brief (<u> </u> pgs)	<input type="checkbox"/> Notice of Appeal
<input type="checkbox"/> Application: _____ (<u> </u> pgs) w/cover & abstract)	<input type="checkbox"/> Petition for: _____
<input type="checkbox"/> Assignment & Cover Sheet (<u> </u> pgs)	<input type="checkbox"/> Request for Continued Examination (RCE)
<input checked="" type="checkbox"/> Certificate of Facsimile	<input type="checkbox"/> Reply Brief (<u> </u> pgs)
<input type="checkbox"/> Continued Prosecution Application (CPA)	<input type="checkbox"/> Request & Certification Under 35 USC 122(b)(2)(B)(i)
<input type="checkbox"/> Declaration & POA (<u> </u> pgs)	<input type="checkbox"/> Request to Rescind Previous Nonpublication Request
<input type="checkbox"/> Drawings: <u> </u> sheets, <u> </u> figures	<input type="checkbox"/> Response to Notice of Missing Parts & Formalities Letter
<input type="checkbox"/> Extension of Time: _____	<input type="checkbox"/> Response to Written Opinion (<u> </u> pgs)
<input checked="" type="checkbox"/> Fee Transmittal (In duplicate)	<input type="checkbox"/> Terminal Disclaimer
<input type="checkbox"/> IDS & PTO/SB/08 (<u> </u> pgs)	<input type="checkbox"/> Transmittal of Publication Fee Due
<input type="checkbox"/> Other _____	<input checked="" type="checkbox"/> Transmittal Letter

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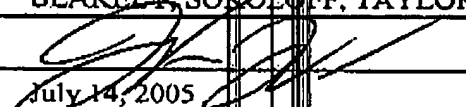

 Susan McFarlane Date 7/14/2005


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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application No.	09/896,088	
	Filing Date	June 28, 2001	
	First Named Inventor	Carl M. Ellison	
	Art Unit	2136	
	Examiner Name	Eleni A. Shiferaw	
Total Number of Pages in This Submission	4	Attorney Docket Number	42390P11770

ENCLOSURES (check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Response <input checked="" type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> PTO/SB/08 <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Basic Filing Fee <input type="checkbox"/> Declaration/POA <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation <input type="checkbox"/> Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD Number of CD(s)	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; height: 60px; width: 100%;"></div>
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT	
Firm or Individual name	William W. Schatz, Reg. No. 39,018 BLAKELY, SOLOFF, TAYLOR & ZAFMAN LLP
Signature	
Date	July 14, 2005

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Typed or printed name	Susan McFarlane		
Signature		Date	July 14, 2005

Based on PTO/SD/21 (04-04) as modified by Blakely, Soloff, Taylor & Zafman (M) 06/04/2004.
 SEND TO: Commissioner for Patents, P. O. Box 1400, Alexandria, VA 22304-1450

PAGE 3/15 * RCVD AT 7/14/2005 4:51:05 PM [Eastern Daylight Time] * SVR:USPTO-EFXRF-1/5 * DNIS:8729306 * CSID:7145573347 * DURATION (mm-ss):04-48

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**FEE TRANSMITTAL
for FY 2005**

Patent fees are subject to annual revision.

☐ Applicant claims small entity status. See 37 CFR 1.27.

TOTAL AMOUNT OF PAYMENT (\$)

0.00

Complete if Known

Application Number	09/896,088
Filing Date	June 28, 2001
First Named Inventor	Carl M. Ellison
Examiner Name	Eleni A. Shiferaw
Art Unit	2136
Attorney Docket No.	42390P11770

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account Deposit Account Number: 02-2660 Deposit Account Name: Blakely, Sokoloff, Taylor & Zafman LLP

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee

☒ Charge any additional fee(s) or underpayment of fee(s) under 37 CFR §§ 1.16, 1.17, 1.18 and 1.20. ☒ Credit any overpayments

FEE CALCULATION**1. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
33 - 33 = 0	0	50.00	\$0.00
Independent Claims: 5 - 5 = 0	0	200.00	\$0.00
Multiple Dependent			

Large Entity		Small Entity		Fee Description
Fee Code	Fee (\$)	Fee Code	Fee (\$)	
1202	60	2202	25	Claims in excess of 20
1201	200	2201	100	Independent claims in excess of 3
1203	380	2203	180	Multiple Dependent claim, if not paid
1204	300	2204	150	**Reissue independent claims over original patent
1205	300	2205	150	**Reissue claims in excess of 20 and over original patent

SUBTOTAL (1)

(\$)

0.00

*or number previously paid, if greater, For Reissues, see below

2. ADDITIONAL FEES

Large Entity		Small Entity		Fee Description	Fee Paid
Fee Code	Fee (\$)	Fee Code	Fee (\$)		
1061	130	2061	65	Surcharge - late filing fee or oath	
1062	50	2062	25	Surcharge - late provisional filing fee or cover sheet	
2063	130	2063	130	Non-English specification	
1251	120	2251	60	Extension for reply within first month	
1252	450	2252	225	Extension for reply within second month	
1253	1,020	2253	510	Extension for reply within third month	
1254	1,590	2254	795	Extension for reply within fourth month	
1255	2,160	2255	1,080	Extension for reply within fifth month	
1401	500	2401	250	Notice of Appeal	
1402	500	2402	250	Filing a brief in support of an appeal	
1403	1,000	2403	500	Request for oral hearing	
1451		2451		Petition to institute a public use proceeding	
1480	130	2480	130	Petitions to the Commissioner	
1807	50	1807	50	Processing fee under 37 CFR 1.17(a)	
1808	180	1808	180	Submission of Information Disclosure Statement	
1809	790	1809	395	Filing a submission after final rejection (37 CFR § 1.129(a))	
1810	790	2810	395	For each additional invention to be examined (37 CFR § 1.129(b))	

Other fee (specify)

SUBTOTAL (2)

(\$)

SUBMITTED BY

Name (Print/Type) William W. Schaal

Registration No.
(Attorney/Agent)

39,018

Telephone

(714) 557-3800

Signature

Date

07/14/05

Based on PTO/SB/17 (12-04) as modified by Blakely, Sokoloff, Taylor & Zafman (tw) 12/1/2004.
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P.5/15

Appl. No. 09/896,088
Amdt. Dated 07/14/2005
Reply to Office Action of 05/16/2005

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**RESPONSE UNDER 37 CFR § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP 2136**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Application. No. : 09/896,088
Applicant : Carl M. Ellison
Filed : 06/28/2001
TC/A.U. : 2136
Examiner : Eleni A. Shiferaw

Confirmation No. 9497

Docket No. : 042390.P11770
Customer No. : 8791

Commissioner for Patents
PO Box 1450
Alexandria VA 22313-1450

AMENDMENT UNDER 37 CFR § 1.116

Sir:

In response to the Office action of 5/16/2005, please amend the above-identified application as follows:

Amendments to the Claims are reflected in the listing of claims which begins on page 2 of this paper.

Remarks/Arguments begin on page 8 of this paper.

Docket No: 042390.P11770

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